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OCT 02 2007

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21773 7590 08/22/2007

**CYMER INC**  
**LEGAL DEPARTMENT**  
**17075 Thormint Court**  
**SAN DIEGO, CA 92127-2413**

10/03/2007 FMETEK12 00000040 034060 10789328

01 FC:1501 1440.00 D0	02 FC: 504 APPLICATION NO 00 D1	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO	CONFIRMATION NO.
03 FC:6001 10789328 00 D0		02/27/2004	Robert J. Rafac	2003-0107-01	9393

TITLE OF INVENTION: BANDWIDTH ESTIMATION

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmittal.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Stephanie Sharrett	(Depositor's name)
<i>Stephanie Sharrett</i>	(Signature)
October 2, 2007	(Date)

APPLN TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	11/23/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
TURNER, SAMUEL A	2877	336-519000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1 William Cray
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		2
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		3

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

## (A) NAME OF ASSIGNEE

CYMER, INC.

## (B) RESIDENCE: (CITY and STATE OR COUNTRY)

San Diego, California USA

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

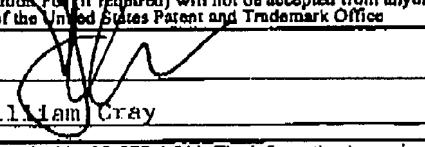
4a. The following fee(s) are submitted:	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)
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<input checked="" type="checkbox"/> Advance Order - # of Copies 10	<input type="checkbox"/> The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 03-4060 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(b)(2).

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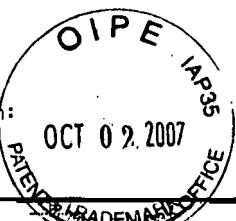
Authorized Signature   
 Typed or printed name William Cray

Date October 2 2007

Registration No. 27,627

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Applicant(s): Robert Rufus

Docket No.

2003-0107-01

Application No.  
10/789,328Filing Date  
2/27/2004Examiner  
S. TurnerGroup Art Unit  
2877

Invention: Methods and Apparatus for Bandwidth Measurement and Bandwidth Parameter Calculation for Laser Light (As Amended); Trans. Payment of Issue Fee -1 pg; PTOL-85B -1 pg; Deposit Acct Sheet -1 pg; I.312 Amendment 40 pgs; and Facsimile Cover Sheet -1 pg

I hereby certify that this  Trans. Payment of Issue Fee & PTOL-85B w/I.312 Amendment  
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(Typed or Printed Name of Person Signing Certificate)

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